FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION VED
Washington, D.C. 20549

FORM D

APR 2 5 2005

OMB APPROVAL
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NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING FYERD

ONIFORM LIMITED OFFERING	J EAEWIT II
Name of Offering (check if this is an amendment and name has changed, and indicate 504 Offering Pursuant to Reg. D	change.)
Filing Under (Check box(es) that apply):	Section 4(6)
A. BASIC IDENTIFICATION I	DATA
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate ch	ange.)
Interquad Software Solutions, Inc.	
Address of Executive Offices (Number and Street, City, State	, Zip Code) Telephone Number (Including Area Code)
850 West Hastings, Suite 302 Vancouver, BC V6C 1E1	604-685-7552
Address of Principal Business Operations (Number and Street, City, Stat (if different from Executive Offices)	e, Zip Code) Telephone Number (Including Area Code)
Brief Description of Business	Y
Software development	(
Type of Business Organization corporation limited partnership, already formed	other (please specify):
business trust limited partnership, to be formed	MAY 0 3 2005
Actual or Estimated Date of Incorporation or Organization: O 3 O 5 Act Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbrevi CN for Canada; FN for other foreign jurisd	ation for State: FINANCIAL
GENERAL INSTRUCTIONS	

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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SEC 1972 (6-02)

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		, A. BASIC IDI	ENTIFICATION DATA		100 may 100 ma
2. Enter the information re	quested for the fol	llowing:			
 Each promoter of t 	he issuer, if the iss	suer has been organized w	ithin the past five years;		
 Each beneficial ow 	ner having the pow	er to vote or dispose, or dis	ect the vote or disposition	of, 10% or more of a	class of equity securities of the issuer.
 Each executive off 	icer and director of	f corporate issuers and of	corporate general and man	naging partners of pa	rtnership issuers; and
• Each general and n	nanaging partner o	f partnership issuers.			
Check Box(es) that Apply:	Promoter	■ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	£ 1				
Briner, Julius					
Business or Residence Addre 22359 47th Ave., Langle			ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)	#1F	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	de)		
	(Use blan	nk sheet, or copy and use	additional copies of this s	heet, as necessary)	

	,				, B. If	FORMAT	ION ABOU	T OFFERI	NG 1		20,00		
1.	Hac the	issuer sold	or does th	e iccuer ir	stend to sel	1 to non-a	ccredited in	westors in	this offeri	na?		Yes	No ®
1.	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.									<u>L.</u>			
2.											\$_0.00	3	
	3. Does the offering permit joint ownership of a single unit?										Yes	No	
3.		_											
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
Full	Name (I	ast name	first, if indi	vidual)									
Busi	iness or l	Residence	Address (N	umber and	l Street, Ci	ty, State, Z	Cip Code)						
Nam	ne of Ass	ociated Br	oker or Dea	ıler									
State	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers	 _			<u>.</u>		
	(Check	"All States	" or check i	individual	States)		***************************************		•••••	••••••		☐ Al	States
	AL	ĀK	ΑZ	ĀR	CA	CO	CT	DE	DC	FL	GA	HI	ĪD
	IL	IN	1A	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC VA	ND WA	OH)	OK WI	OR	PA DD
	RI	SC	SD	[TN]	TX	UT	[VT]	VA	WA	WV	WI	\overline{WY}	PR
Full	Name (I	ast name :	first, if indi	vidual)									
Busi	iness or	Residence	Address (N	lumber an	d Street, C	ity, State, 2	Zip Code)			,, 			**
Nam	ne of Ass	ociated Br	oker or Dea	ıler									
State	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	" or check i	individual	States)		***************************************					☐ Al!	States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
Full			first, if indi										
				·									
Busi	iness or	Residence	Address (N	lumber an	d Street, C	ity, State, Z	Zip Code)						
Nam	ne of Ass	ociated Br	oker or Dea	ıler						140		 	
State	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
(Check "All States" or check individual States)								☐ All	l States				
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI OH	MN	MS	MO PA
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	WV	OK WI	OR WY	PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check		
	this box and indicate in the columns below the amounts of the securities offered for exchange and		
	already exchanged.	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt	\$_0.00	\$_0.00
	Equity	\$ 1,000,000.00	\$ 5,000.00
			0.00
	Convertible Securities (including warrants)	\$_0.00	0.00 \$
	Partnership Interests		§_0.00
	Other (Specify)	\$ 0.00	\$_0.00
	Total	\$ 1,000,000.00	\$ 5,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases \$ 5,000.00
	Accredited Investors		
	Non-accredited Investors		\$ 0.00
	Total (for filings under Rule 504 only)	1	\$ 5,000.00
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total		\$_0.00

	C. OFFERING PRICE, NUME	BER OF INVESTORS, EXPENSES AND USE OF PR	OCEEDS	
	b. Enter the difference between the aggregate offeri and total expenses furnished in response to Part C— proceeds to the issuer."	Question 4.a. This difference is the "adjusted gross		1,000,000.00
5.	Indicate below the amount of the adjusted gross pro each of the purposes shown. If the amount for any check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees] \$	s
	Purchase of real estate] \$	\$
	Purchase, rental or leasing and installation of mach and equipment	hinery] \$	
	Construction or leasing of plant buildings and faci	lities] \$	\$
	Acquisition of other businesses (including the valu offering that may be used in exchange for the asse issuer pursuant to a merger)	ts or securities of another] \$	
	Repayment of indebtedness		\$	
	Working capital		="	
	Other (specify):			
] \$	\$
	Column Totals		\$_0.00	\$_0.00
	Total Payments Listed (column totals added)		□ \$ <u>.0.</u>	00
	· 美国的特别的	D. FEDERAL SIGNATURE		
sig	issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to furninformation furnished by the issuer to any non-accr	nish to the U.S. Securities and Exchange Commiss	ion, upon writte	
SSI	ner (Print or Type)	Signature D	ate	
Int	erquad Software Solutions, Inc.		April 6	, 2005
	ne of Signer (Print or Type) us Briner	Title of Siguer (Print or Type) President		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No K

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Interquad Software Solutions, Inc.		4nil 6, 2005
Name (Print or Type) Julius Briner	Title (Print or Type) President	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 1 2 3 5 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach to non-accredited offering price Type of investor and explanation of amount purchased in State investors in State offered in state waiver granted) (Part C-Item 2) (Part C-Item 1) (Part E-Item 1) (Part B-Item 1) Number of Number of Accredited Non-Accredited Yes Yes No State No **Investors** Investors Amount Amount ALAK ΑZ AR $\mathsf{C}\mathsf{A}$ CO CT DE DC FL $\mathsf{G}\mathsf{A}$ HIID IL INIΑ KS KY LA ME MD MA MI MNMS

APPENDIX 2 3 5 1 4 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach to non-accredited offering price Type of investor and explanation of investors in State offered in state amount purchased in State waiver granted) (Part C-Item 1) (Part C-Item 2) (Part B-Item 1) (Part E-Item 1) Number of Number of Non-Accredited Accredited State Yes No Investors Amount **Investors** Yes No Amount MO MT NE NVNH NJ NM NY NC ND OH OK OR PA RI SCSD TN1 0 \$0.00 X Common; \$1 Mil \$5,000.00 X TXUT VTVAWA WV WI

APPENDIX									
1	Type of security and aggregate to non-accredited investors in State (Part B-Item 1) Type of security and aggregate offering price offered in state (Part C-Item 1)			Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
PR									